

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

APR 13 12 00 AM '96

1. NAME OF COMMITTEE (in full)  
NATIONAL ASSOCIATION OF CHAIN DRUG STORES  
POLITICAL ACTION COMMITTEE

ADDRESS (number and street)  Check if different than previously reported  
P.O. BOX 1417-D49

CITY, STATE and ZIP CODE  
ALEXANDRIA, VA 22313

2. FEC IDENTIFICATION NUMBER  
C-000-22-368

3.  This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

Monthly Report Due On:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

- Twelfth day report preceding \_\_\_\_\_  
(Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	1/1/96 through 3/31/96		
6. (a)	Cash on Hand January 1, 19 96		\$ 9,385.59
(b)	Cash on Hand at Beginning of Reporting Period	\$ 9,385.59	
(c)	Total Receipts (from Line 19)	\$ 150.30	\$ 150.30
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 9,535.89	\$ 9,535.89
7.	Total Disbursements (from Line 30)	\$ 3,093.70	\$ 3,093.70
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 6,442.19	\$ 6,442.19
9.	Debits and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debits and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

R. James Huber

Signature of Treasurer

*R. James Huber*

Date

4/12/96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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**FEC FORM 3X**  
(revised 9/93)

3 6 0 3 0 4 2 0 1 7

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO	
I. Receipts			
	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			11(a)(i)
i. Itemized (use Schedule A)	100.00	100.00	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) >	100.00	100.00	11(b)
b. Political Party Committees			11(c)
c. Other Political Committees (such as PACs)			11(d)
d. Total Contributions (add a iii, b and c) >	100.00	100.00	12
12. Transfers From Affiliated/Other Party Committees			13
13. All Loans Received			14
14. Loan Repayments Received			15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17. Other Federal Receipts (Dividends, Interest, etc.)	50.30	50.30	18
18. Transfers from Nonfederal Account for Joint Activity			19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	150.30	150.30	20
20. Total Federal Receipts (subtract line 18 from line 19) >			
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures Taxes	93.70	93.70	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >	93.70	93.70	22
22. Transfers to Affiliated/Other Party Committees			23
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,000.00	3,000.00	24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			
28. Refunds of Contributions To:			28(a)
a. Individual/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committees (such as PACs)			28(d)
d. Total Contribution Refunds (add a, b and c) >			29
29. Other Disbursements			30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	3,093.70	3,093.70	31
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	3,093.70	3,093.70	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	100.00	100.00	33
33. Total Contribution Refunds (from line 28d)	-0-	-0-	34
34. Net Contributions (other than loans)(subtract line 33 from 32)	100.00	100.00	35
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	93.70	93.70	36
36. Offsets to Operating Expenditures (from line 15)			37
37. Net Operating Expenditures (subtract line 36 from 35) >	93.70	93.70	

2010  
 2011  
 2012  
 2013  
 2014  
 2015  
 2016  
 2017  
 2018  
 2019  
 2020

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1  
FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

NATIONAL ASSOCIATION OF CHAIN STORES POLITICAL ACTION COMMITTEE

9 5 0 3 0 4 2 0 1 0 9

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dole for President Compliance Cmt 810 First Street, N.E., Suite 300 Washington D.C. 20002	R-Pres Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/16/96	2,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Senator John Warner 2111 Eisenhower Avenue, Suite 402 Alexandria, VA 2234	R-VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/16/96	1,500.00
C. Full Name, Mailing Address and ZIP Code Glen D. Johnson for Congress Committee 323 West Broadway Muskogee, OK 74401	D-OK-2 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/8/96	1,000.00
D. Full Name, Mailing Address and ZIP Code Giphardt in Congress Committee 607 Capital Court, N.E. Suite 100 Washington, D.C. 20002	D-MD-3 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/3/94	(1,000.00) Stop Payment
E. Full Name, Mailing Address and ZIP Code Friends for Jim McDermott 555 New Jersey Ave, N.W. Suite 201 Washington, D.C. 20001	R-Pres Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/94	(1,000.00) Stop Payment
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) ..... 3,000.00

TOTAL This Period (last page this line number only) ..... 3,000.00

**Federal Election Commission  
 ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

First Class Mail

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4-12-96

No Postmark

Postmark Illegible

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 and Registration

DATE OF RECEIPT

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 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

MSM  
 PREPARER

4-16-96  
 DATE PREPARED

9 6 0 3 0 4 2 0 2 0 0